

# FEE TRANSMITTAL

Patent fees are subject to annual revision

☐ Applicant claims small entity status. See 37 CFR 1.27
TOTAL AMOUNT OF PAYMENT (\$)**0.00****Complete if Known**

Application Number	09/651,382
Filing Date	8/29/00
First Named Inventor	Souissi, Slim et al.
Examiner Name	J. Lee
Group Art Unit	2682
Attorney Docket No.	PF01963NA

**METHOD OF PAYMENT (check all that apply)**

Check	<input type="checkbox"/>	Credit card	<input type="checkbox"/>	Money Order	<input type="checkbox"/>	Other	<input type="checkbox"/>	None	<input type="checkbox"/>
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☒ Deposit Account:

Deposit Account Number

**502117**

Deposit Account Name

**Motorola, Inc.**

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below

☒ Credit any overpayments

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17

☐ Charge fees(s) indicated below, except for the filing fee to the above-identified deposit account.
**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fee Paid (\$)
	Large Fee (\$)	Small Entity Fee (\$)	Large Fee (\$)	Small Entity Fee (\$)	Large Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXTRA CLAIM FEES**

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

Fee (\$)	Small Entity Fee (\$)
50	25

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

Fee (\$)	Small Entity Fee (\$)
200	100
360	180

Multiple Dependent Claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
- 20 or HP =		x 50				
HP = highest number of total claims paid for, if greater than 3					360	

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP =		x 200	

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper, the application size fee is \$250 (\$125 for small entity)

For each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(e).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =		/50 = (round up to a whole number)	x 250	

**FEE CALCULATION (continued)****4. ADDITIONAL FEES**

	Large Entity	Small Entity		
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1051	130	2051	65	Surcharge - late filing fee or oath
1052	50	2052	25	Surcharge - late Provisional filing
1053	130	1053	130	Non-English specification
1812	2520	1812	2520	For filing a request for ex parte Reexamination
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action
1806	1840*	1806	1840*	Requesting publication of SIR after Examiner action
1251	120	2251	60	Extension for reply within first month
1252	450	2252	225	Extension for reply within second month
1253	1020	2253	510	Extension for reply within third month
1254	1590	2254	795	Extension for reply within fourth month
1255	2160	2255	1080	Extension for reply within fifth month
1401	500	2401	250	Notice of Appeal
1402	500	2402	250	Filing a brief in support of an appeal
1403	1000	2403	500	Request for oral hearing
1451	1510	1451	1510	Petition to institute a public use proceeding
1452	500	2452	250	Petition to revive - unavoidable
1453	1500	2453	750	Petition to revive - unintentional
1501	1400	2501	700	Utility issue fee (or reissue)
1502	800	2502	400	Design issue fee
1503	1100	2503	550	Plant issue fee
1460	130	1460	130	Petitions to the Commissioner
1807	50	1807	50	Processing fee under 37 CFR 1.17(e)
1806	180	1806	180	Submission of IDS
8021	40	8021	40	Recording each patent assignment per property (times number of properties)
1809	790	2809	395	Filing a submission after final rejection (37 CFR § 1.129(e))
1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))
1801	790	2801	395	Request for Continued Examination
1802	900	1802	900	Request for expedited examination of a design application.

Fee Paid (\$)

**5. OTHER FEE(S) (specify)**

Non-English Specification, \$130 fee (no small entity discount)

Fee Paid (\$)

**SUBMITTED BY**

Name (Print/Type)

**Roland K. Bowler II**

Signature

Registration No.

**33,477**

Telephone

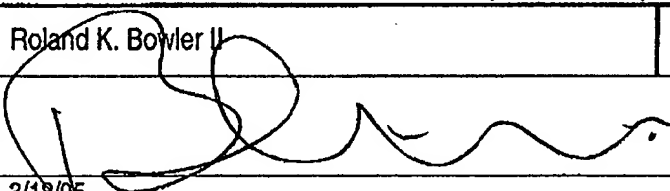
**847-523-3978**

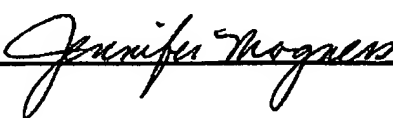
Date

**19 MAR 2005**

<b>TRANSMITTAL FORM</b>		Application Number	09/651,382
		Filing Date	8/29/00
		First Named Inventor	Souissi, Slim et al.
		Group Art Unit	2682
		Examiner Name	J. Lee
Total Number of Pages in this Submission	4	Attorney Docket Number	PF01963NA

ENCLOSURES		(check all that apply)
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-Related papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CDs	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter with appropriate copies <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below) <input checked="" type="checkbox"/> PTO/SB/08A <input type="checkbox"/> PCT Search Report
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual	Roland K. Bowler II	Registration No.	33,477
Signature			
Date	3/18/05		

CERTIFICATE OF TRANSMITTAL/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO to facsimile number _____ or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on the date listed below:			
Typed or printed name	Jennifer Magness		
Signature		Date	3/18/05

\*The date stamp herein is an acknowledgment that on the date stamped,  
the U.S. Patent and Trademark Office received the follow

Docket No.:	PF01963NA	Mail Date:	3/18/05
Applicant:	Soulissi, Slim et al.	Serial No.	09/651,382
Entitled:	Method of Enabling Low Tier Location Applications		
RKB/jhm	Paid by Deposit Account # 502117 \$00.00		
Express Mail No.			

All items marked with an "X" are included in Mail Package.

Pages		Description
	X	Return Receipt Postcard
1	X	Fee Transmittal - 2 copies
2	X	Information Disclosure Statement
1	X	Form PTO/SB/08 w/prior art references (1 # of references)
1	X	Transmittal Form
		PCT Search Report

J. I. LEE EXR  
X 7980

MSG FOR CHIN (X 7901?)  
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